

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC

ADDRESS (number and street) 420 W. Pinhook Road Suite A LAFAYETTE LA 70503

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00382796

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports: April 15 Quarterly Report (Q1), July 15 Quarterly Report (Q2), October 15 Quarterly Report (Q3), January 31 Year-End Report (YE), July 31 Mid-Year Report (Non-election Year Only) (MY), Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9) [checked], Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S). Election on [MM/DD/YYYY] in the State of [ ]

(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S). Election on [MM/DD/YYYY] in the State of [ ]

5. Covering Period 08/01/2014 through 08/31/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Albert Simien

Signature of Treasurer Albert Simien [Electronically Filed] Date 09/20/2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="1061.18"/>	<input type="text" value="1061.18"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="23877.42"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="3040.86"/>	<input type="text" value="28607.10"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="26918.28"/>	<input type="text" value="29668.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="2750.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="26918.28"/>	<input type="text" value="26918.28"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2452.48	17614.21
(ii) Unitemized .....	588.38	10992.89
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3040.86	28607.10
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	3040.86	28607.10
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3040.86	28607.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3040.86	28607.10

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2750.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	2750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	2750.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3040.86	28607.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3040.86	28607.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Jeffrey Barr</b>		Date of Receipt
Mailing Address 12370 Beragio Place		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
Alpharetta	GA	30004
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
LHC Group	Regional Market Development Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="340.00"/>	
		Transaction ID : <b>SA11Al.15066</b>
		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
		Payroll Deduction (\$20 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. Jeffrey Barr</b>		Date of Receipt
Mailing Address 12370 Beragio Place		<input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
Alpharetta	GA	30004
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
LHC Group	Regional Market Development Director	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="360.00"/>	
		Transaction ID : <b>SA11Al.15067</b>
		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
		Payroll Deduction (\$20 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Pam Bridges</b>		Date of Receipt
Mailing Address 1625 Ormandy Drive		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
Baton Rouge	LA	70808
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Louisiana Health Care Group, I	Corporate Trainer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="510.00"/>	
		Transaction ID : <b>SA11Al.15086</b>
		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
		Payroll Deduction (\$30 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Pam Bridges**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1625 Ormandy Drive  
City Baton Rouge State LA Zip Code 70808  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Louisiana Health Care Group, I Occupation Corporate Trainer  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **540.00**

Date of Receipt **08 / 21 / 2014**  
**Transaction ID : SA11AI.15087**  
Amount of Each Receipt this Period **30.00**  
Payroll Deduction (\$30 Bi-Weekly)

**B. Chris Duhon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10429 Rue de Duhon  
City Abbeville State LA Zip Code 70510  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LHC Group Occupation RN  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **510.00**

Date of Receipt **08 / 08 / 2014**  
**Transaction ID : SA11AI.15088**  
Amount of Each Receipt this Period **30.00**  
Payroll Deduction (\$30 Bi-Weekly)

**C. Chris Duhon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10429 Rue de Duhon  
City Abbeville State LA Zip Code 70510  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LHC Group Occupation RN  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **540.00**

Date of Receipt **08 / 21 / 2014**  
**Transaction ID : SA11AI.15089**  
Amount of Each Receipt this Period **30.00**  
Payroll Deduction (\$30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **90.00**  
**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 23  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)  
**A. Ronda Dupree**

Mailing Address 130 Hwy 132

City Delhi	State LA	Zip Code 71232
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation State Operation Director
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2014

**Transaction ID : SA11AI.15090**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction (\$30 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Ronda Dupree**

Mailing Address 130 Hwy 132

City Delhi	State LA	Zip Code 71232
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation State Operation Director
-------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2014

**Transaction ID : SA11AI.15091**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction (\$30 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Lessley Fontenot**

Mailing Address 2303 sandalwood Drive

City Lafayette	State LA	Zip Code 70570
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation Area Sales Manager
-------------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2014

**Transaction ID : SA11AI.15068**

Amount of Each Receipt this Period  
**25.00**

Payroll Deduction (\$25 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>85.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)  
**A. Lessley Fontenot**

Mailing Address 2303 sandalwood Drive

City Lafayette State LA Zip Code 70570

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Area Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **08 / 21 / 2014**

**Transaction ID : SA11AI.15069**

Amount of Each Receipt this Period **25.00**

Payroll Deduction (\$25 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Barbara Goodman**

Mailing Address 420 W. Pinhook Road

City Lafayette State LA Zip Code 70503

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Regional Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **08 / 08 / 2014**

**Transaction ID : SA11AI.15104**

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Barbara Goodman**

Mailing Address 420 W. Pinhook Road

City Lafayette State LA Zip Code 70503

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Regional Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **08 / 21 / 2014**

**Transaction ID : SA11AI.15105**

Amount of Each Receipt this Period **15.00**

Payroll Deduction (\$15 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **55.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Mary Gray**  
Full Name (Last, First, Middle Initial)

Mailing Address 1528 Greenwich Circle

City Birmingham, State AL Zip Code 35226

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Operation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt **08 / 08 / 2014**

**Transaction ID : SA11Al.15092**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

**B. Mary Gray**  
Full Name (Last, First, Middle Initial)

Mailing Address 1528 Greenwich Circle

City Birmingham, State AL Zip Code 35226

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Operation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt **08 / 21 / 2014**

**Transaction ID : SA11Al.15093**

Amount of Each Receipt this Period **30.00**

Payroll Deduction (\$30 Bi-Weekly)

**C. Richard Hollier**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 95

City Opleousas, State LA Zip Code 70571

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Health Care Group, I Occupation Legal Compliance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt **08 / 08 / 2014**

**Transaction ID : SA11Al.15163**

Amount of Each Receipt this Period **40.00**

Payroll Deduction (\$40 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **100.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Richard Hollier**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 95  
 City Opleousas State LA Zip Code 70571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Louisiana Health Care Group, I Occupation Legal Compliance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **720.00**

Date of Receipt **08 / 21 / 2014**  
**Transaction ID : SA11AI.15164**  
 Amount of Each Receipt this Period **40.00**  
 Payroll Deduction (\$40 Bi-Weekly)

**B. Jeffrey Kreger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Creek Bnd  
 City Lafayette State LA Zip Code 70508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation Sr. VP of Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **3400.00**

Date of Receipt **08 / 08 / 2014**  
**Transaction ID : SA11AI.15072**  
 Amount of Each Receipt this Period **200.00**  
 Payroll Deduction (\$200 Bi-Weekly)

**C. Jeffrey Kreger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Creek Bnd  
 City Lafayette State LA Zip Code 70508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation Sr. VP of Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **3600.00**

Date of Receipt **08 / 21 / 2014**  
**Transaction ID : SA11AI.15073**  
 Amount of Each Receipt this Period **200.00**  
 Payroll Deduction (\$200 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **440.00**  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Melanie Kuehn</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : SA11AI.15108</b>
Mailing Address 4205 Persimmon Way		Amount of Each Receipt this Period 50.00
City Lake Charles	State LA	Zip Code 70518
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$50 Bi-Weekly)
Name of Employer LHC Group	Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) <b>B. Melanie Kuehn</b>		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 <b>Transaction ID : SA11AI.15109</b>
Mailing Address 4205 Persimmon Way		Amount of Each Receipt this Period 50.00
City Lake Charles	State LA	Zip Code 70518
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$50 Bi-Weekly)
Name of Employer LHC Group	Occupation DVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) <b>C. Amy Laing</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : SA11AI.15165</b>
Mailing Address 238 Dogwood Springs Lane		Amount of Each Receipt this Period 40.00
City Mena	State AR	Zip Code 71953
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$40 Bi-Weekly)
Name of Employer LHC Group	Occupation State Market Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Amy Laing</b>		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 <b>Transaction ID : SA11AI.15166</b>
Mailing Address 238 Dogwood Springs Lane		Amount of Each Receipt this Period 40.00
City Mena	State AR	Zip Code 71953
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$40 Bi-Weekly)
Name of Employer LHC Group	Occupation State Market Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

Full Name (Last, First, Middle Initial) <b>B. Ryan Latiolais</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : SA11AI.15074</b>
Mailing Address 1215 Gendarme Rd		Amount of Each Receipt this Period 20.00
City Carencro	State LA	Zip Code 70520
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$20 Bi-Weekly)
Name of Employer LHC Group	Occupation Director of Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) <b>C. Ryan Latiolais</b>		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 <b>Transaction ID : SA11AI.15075</b>
Mailing Address 1215 Gendarme Rd		Amount of Each Receipt this Period 20.00
City Carencro	State LA	Zip Code 70520
FEC ID number of contributing federal political committee. C		Payroll Deduction (\$20 Bi-Weekly)
Name of Employer LHC Group	Occupation Director of Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Errol Leblanc**  
Full Name (Last, First, Middle Initial)

Mailing Address 5908 John Boudreaux Road,  
City Abbeville State LA Zip Code 70510

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation PT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt **08 / 08 / 2014**  
**Transaction ID : SA11AI.15076**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20 Bi-Weekly)

**B. Errol Leblanc**  
Full Name (Last, First, Middle Initial)

Mailing Address 5908 John Boudreaux Road,  
City Abbeville State LA Zip Code 70510

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation PT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **08 / 21 / 2014**  
**Transaction ID : SA11AI.15077**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20 Bi-Weekly)

**C. Richard MacMillian**  
Full Name (Last, First, Middle Initial)

Mailing Address 324 Deer Park Trial  
City Lafayette State LA Zip Code 70508

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Legal Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3040.00**

Date of Receipt **08 / 08 / 2014**  
**Transaction ID : SA11AI.15149**

Amount of Each Receipt this Period **190.00**

Payroll Deduction (\$190 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>230.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Richard MacMillian**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 324 Deer Park Trail  
 City Lafayette State LA Zip Code 70508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation Legal Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3230.00

Date of Receipt 08 / 21 / 2014  
**Transaction ID : SA11AI.15150**  
 Amount of Each Receipt this Period 190.00  
 Payroll Deduction (\$190 Bi-Weekly)

**B. Rebecca McCoy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 57 Short Side Drive  
 City Williamstown State WV Zip Code 26187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation State Operations Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 08 / 2014  
**Transaction ID : SA11AI.15094**  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30 Bi-Weekly)

**C. Rebecca McCoy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 57 Short Side Drive  
 City Williamstown State WV Zip Code 26187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LHC Group Occupation State Operations Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 08 / 21 / 2014  
**Transaction ID : SA11AI.15095**  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction (\$30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Brach Myers</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : SA11AI.15167</b>
Mailing Address 201 Worth Ave.		Amount of Each Receipt this Period 40.00
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee.	C	Payroll Deduction (\$40 Bi-Weekly)
Name of Employer LHC Group	Occupation Vice President of Strategic Partnershi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	

Full Name (Last, First, Middle Initial) <b>B. Brach Myers</b>		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 <b>Transaction ID : SA11AI.15168</b>
Mailing Address 201 Worth Ave.		Amount of Each Receipt this Period 40.00
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee.	C	Payroll Deduction (\$40 Bi-Weekly)
Name of Employer LHC Group	Occupation Vice President of Strategic Partnershi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

Full Name (Last, First, Middle Initial) <b>C. Keith Myers</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : SA11AI.15169</b>
Mailing Address 211 Morning Mist		Amount of Each Receipt this Period 40.00
City Sunset	State LA	Zip Code 70584
FEC ID number of contributing federal political committee.	C	Payroll Deduction (\$40 Bi-Weekly)
Name of Employer The LHC Group	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Keith Myers</b>		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 <b>Transaction ID : SA11Al.15170</b>
Mailing Address 211 Morning Mist		Amount of Each Receipt this Period 40.00
City Sunset	State LA	Zip Code 70584
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$40 Bi-Weekly)	
Name of Employer The LHC Group	Occupation President/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

Full Name (Last, First, Middle Initial) <b>B. Cathy Newhouse</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : SA11Al.15171</b>
Mailing Address 97 Stonehill Road		Amount of Each Receipt this Period 50.00
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$50 Bi-Weekly)	
Name of Employer LHC Group	Occupation Sr. VP of Clinical Program Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) <b>C. Cathy Newhouse</b>		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 <b>Transaction ID : SA11Al.15172</b>
Mailing Address 97 Stonehill Road		Amount of Each Receipt this Period 50.00
City Lafayette	State LA	Zip Code 70508
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$50 Bi-Weekly)	
Name of Employer LHC Group	Occupation Sr. VP of Clinical Program Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. Ted Pappas</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : SA11AI.15133</b>
Mailing Address 440 Hwy 758		Amount of Each Receipt this Period 19.24 Payroll Deduction (\$19.24 Bi-Weekly)
City Eunice	State LA	Zip Code 70535
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 327.08	
Name of Employer LHC Group	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Ted Pappas</b>		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 <b>Transaction ID : SA11AI.15134</b>
Mailing Address 440 Hwy 758		Amount of Each Receipt this Period 19.24 Payroll Deduction (\$19.24 Bi-Weekly)
City Eunice	State LA	Zip Code 70535
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 346.32	
Name of Employer LHC Group	Occupation PT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Melisa Rittenberry</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : SA11AI.15078</b>
Mailing Address 3341 Quail Run Ct		Amount of Each Receipt this Period 20.00 Payroll Deduction (\$20 Bi-Weekly)
City Nashville	State TN	Zip Code 37214
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 340.00	
Name of Employer LHC Group	Occupation Regional Operations Directory	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	58.48
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Melisa Rittenberry**  
Full Name (Last, First, Middle Initial)

Mailing Address 3341 Quail Run Ct

City Nashville State TN Zip Code 37214

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation Regional Operations Directory

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **08 / 21 / 2014**

**Transaction ID : SA11AI.15079**

Amount of Each Receipt this Period **20.00**

Payroll Deduction (\$20 Bi-Weekly)

**B. Albert Simien**  
Full Name (Last, First, Middle Initial)

Mailing Address 111 Shadowbrook Lane

City Youngsville State LA Zip Code 70592

FEC ID number of contributing federal political committee. **C**

Name of Employer LGC Group Occupation Director of Purchasing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **654.50**

Date of Receipt **08 / 08 / 2014**

**Transaction ID : SA11AI.15096**

Amount of Each Receipt this Period **38.50**

Payroll Deduction (\$38.50 Bi-Weekly)

**C. Albert Simien**  
Full Name (Last, First, Middle Initial)

Mailing Address 111 Shadowbrook Lane

City Youngsville State LA Zip Code 70592

FEC ID number of contributing federal political committee. **C**

Name of Employer LGC Group Occupation Director of Purchasing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **693.00**

Date of Receipt **08 / 21 / 2014**

**Transaction ID : SA11AI.15097**

Amount of Each Receipt this Period **38.50**

Payroll Deduction (\$38.50 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... **97.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Tami Stout**  
Full Name (Last, First, Middle Initial)

Mailing Address 1113 Fawn Run

City Somerset, State KY Zip Code 92501

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Market Development Dir.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2014  
**Transaction ID : SA11AI.15080**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 Bi-Weekly)

**B. Tami Stout**  
Full Name (Last, First, Middle Initial)

Mailing Address 1113 Fawn Run

City Somerset, State KY Zip Code 92501

FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group Occupation State Market Development Dir.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 21 / 2014  
**Transaction ID : SA11AI.15081**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 Bi-Weekly)

**C. Harold Taylor**  
Full Name (Last, First, Middle Initial)

Mailing Address 252 Purple Dawn Drive

City Sunset, State LA Zip Code 70584

FEC ID number of contributing federal political committee. **C**

Name of Employer La. Home Care Group, Inc. Occupation Director of Purchasing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **654.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2014  
**Transaction ID : SA11AI.15098**

Amount of Each Receipt this Period  
**38.50**

Payroll Deduction (\$38.50 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>78.50</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)  
**A. Harold Taylor**

Mailing Address 252 Purple Dawn Drive

City State Zip Code  
 Sunset LA 70584

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 La. Home Care Group, Inc. Director of Purchasing

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 693.00

Date of Receipt  
 08 / 21 / 2014  
**Transaction ID : SA11AI.15099**

Amount of Each Receipt this Period  
 38.50

Payroll Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Gary Thietten**

Mailing Address 10611 Pine Shadow Road

City State Zip Code  
 South Jordan UT 84095

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 LHC Group VP of Corp. Development

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1700.00

Date of Receipt  
 08 / 08 / 2014  
**Transaction ID : SA11AI.15161**

Amount of Each Receipt this Period  
 100.00

Payroll Deduction (\$100 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Gary Thietten**

Mailing Address 10611 Pine Shadow Road

City State Zip Code  
 South Jordan UT 84095

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 LHC Group VP of Corp. Development

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1800.00

Date of Receipt  
 08 / 21 / 2014  
**Transaction ID : SA11AI.15162**

Amount of Each Receipt this Period  
 100.00

Payroll Deduction (\$100 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 238.50

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

Full Name (Last, First, Middle Initial) <b>A. James Tobey</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : SA11Al.15115</b>
Mailing Address 465 Leo Avenue		Amount of Each Receipt this Period 50.00
City Shreveport	State LA	Zip Code 71105
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$50 Bi-Weekly)	
Name of Employer LHC Group	Occupation Director of Sales and Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) <b>B. James Tobey</b>		Date of Receipt MM / DD / YYYY 08 / 21 / 2014 <b>Transaction ID : SA11Al.15116</b>
Mailing Address 465 Leo Avenue		Amount of Each Receipt this Period 50.00
City Shreveport	State LA	Zip Code 71105
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$50 Bi-Weekly)	
Name of Employer LHC Group	Occupation Director of Sales and Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) <b>C. Cynthia Wells</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014 <b>Transaction ID : SA11Al.15082</b>
Mailing Address 367 Adams Circle		Amount of Each Receipt this Period 20.00
City Crawfordsville	State AR	Zip Code 72327
FEC ID number of contributing federal political committee. C	Payroll Deduction (\$20 Bi-Weekly)	
Name of Employer LHC Groups	Occupation Hospice Regional Operations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE INC**

**A. Cynthia Wells**  
Full Name (Last, First, Middle Initial)  
Mailing Address 367 Adams Circle

City Crawfordsville	State AR	Zip Code 72327
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Groups	Occupation Hospice Regional Operations Director
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2014

**Transaction ID : SA11AI.15083**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 Bi-Weekly)

**B. Christa Williams**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1549 Camelot Dr,

City Henderson	State KY	Zip Code 42420
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation RN
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2014

**Transaction ID : SA11AI.15084**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 Bi-Weekly)

**C. Christa Williams**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1549 Camelot Dr,

City Henderson	State KY	Zip Code 42420
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FEC ID number of contributing federal political committee. **C**

Name of Employer LHC Group	Occupation RN
-------------------------------	------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2014

**Transaction ID : SA11AI.15085**

Amount of Each Receipt this Period  
**20.00**

Payroll Deduction (\$20 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>2452.48</b>